

ALASKA TITLE XXI PROGRAM FACT SHEET

Name of Plan:	<i>Denali KidCare</i>
Date Plan Submitted:	August 28, 1998
Date Plan Approved:	December 11, 1998
Effective Date:	March 1, 1999
Date First Amendment Submitted:	August 23, 2002
Date First Amendment Approved:	November 15, 2002
Date First Amendment Effective:	March 1, 1999

Background

- On August 28, 1998, Alaska submitted a Title XXI Plan indicating that the State would expand Medicaid eligibility to children, and the State subsequently submitted the indicated Medicaid State plan amendments. Medicaid expansions will be directed at children in families with incomes below 200 percent of the Federal Poverty Level (FPL). The State will expand Medicaid eligibility in its poverty level groups to children in families with up to 150 percent of the FPL, regardless of whether the children are targeted low-income children (but will claim Federal matching at the enhanced rate only for targeted low-income children) and will extend eligibility to the group of optional targeted low-income children who are in families with incomes above that level but below 200 percent of the FPL. Eligible children will receive the full Medicaid benefit package. All Medicaid program policies will apply. Alaska expects to initiate expanded eligibility on March 1, 1999.
- Alaska's current Medicaid program covers children between the ages of 0 and 1 in families with incomes up to 185 percent of the FPL, ages 1 through 6 in families up to 133 percent of the FPL, and children from age 6 through age 19 in families with incomes up to 100 percent of the FPL.

Children Covered Under Program

- The State reported that 21,831 children were ever enrolled in Denali KidCare during Federal fiscal year 2001.

Administration

- The expanded coverage for children is administered by the Division of Medical Assistance in the Alaska Department of Health and Social Services.

Health Care Delivery System

- Alaska has a fee-for-service health care delivery system with no care management requirements imposed by the Medicaid agency (although some such requirements may be imposed by participating providers). A unique health care delivery system has evolved in Alaska to serve its ethnically diverse and geographically scattered population. Tertiary services are located only in Anchorage where the majority of residents live. Community hospitals are located in smaller urban communities, and two military hospitals are located in Anchorage and Fairbanks. The tribal health care delivery system is virtually the only provider of health care services in rural Alaska. Primary care and emergency services are rendered by community health aides who are trained residents of the village with telephone guidance provided by a physician of the health corporation. There are some preferred provider arrangements, however, there are no HMOs in the State.

Benefit Package

- The benefit package is the Medicaid package.

Cost Sharing

- There is no cost sharing.

Outreach Activities

- Partnerships with the State and local governments, schools, health care providers, tribal entities, and non-profit corporations serving children have been established to ensure that child health is promoted and that families are aware of the Medicaid expansion.

Financial Information

FFY '02 Allotment: \$6,968,138

FFY '02 Enhanced Federal Matching Rate: 67.11%

FFY '03 Allotment: \$7,430,455

FFY '03 Enhanced Federal Matching Rate: 70.79%

Last updated: November 15, 2002